

ISSUE STIP STATE AREA (for additional cross references)

| POSITION                  | INITIALS      | ID NO.     | DATE            |
|---------------------------|---------------|------------|-----------------|
| FEE DETERMINATION         | <i>Daniel</i> |            | <i>09-28-01</i> |
| O.I.P.E. CLASSIFIER       | <i>MTW</i>    | <i>50</i>  | <i>10-12-01</i> |
| FORMALITY REVIEW          | <i>MM</i>     | <i>372</i> | <i>10-30-01</i> |
| RESPONSE FORMALITY REVIEW | <i>A</i>      | <i>076</i> | <i>02/05/02</i> |

INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral) ... Canceled      A ..... Appeal  
 ÷ ..... Restricted      O ..... Objected

| Claim | Final | Original | Date |
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If more than 150 claims or 10 actions  
 staple additional sheet here

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 10/31